

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BZ		8/27
O.I.P.E. CLASSIFIER		10	8-35-06
FORMALITY REVIEW	2H	600135	10/11/06
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	11/6/02
2	10/03
3	10/03
4	10/03
5	10/03
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50	10/03

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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APPLICANTS

TITLE

Form 10-2000 09/642620